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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:	Hiew et al.)	
)	
Serial No.:	09/992,624)	Examiner: not yet assigned
)	
Filed:	11/19/2001)	Group Art Unit: 2123
)	
Title:	SYSTEM AND METHOD FOR GENERATING AND MAINTAINING) SOFTWARE CODE)	Docket No.: 14428.01US3

INFORMATION DISCLOSURE STATEMENT (37 C.F.R. §1.97(b)(1))

Assistant Commissioner for Patents
Washington, D.C. 20231

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Dear Sir:

Technology Center 2106

With regard to the above-identified application, pursuant to 37 C.F.R. §1.56, the items of information listed on the enclosed Form 1449 are brought to the attention of the Examiner.

This statement should be considered because it is submitted, pursuant to 37 C.F.R. §1.97(b)(1), within three months of the filing date of the application; therefore, no fee is required.

In accordance with 37 C.F.R. §1.98(2)(i) and (ii), a copy of each U.S. and foreign patent or publication listed on Form 1449 is enclosed herewith.

In accordance with 37 C.F.R. §1.104, no representation is made that a reference is "prior art" within the meaning of 35 U.S.C. §§102 and 103 and Applicant reserves the right, pursuant to 37 C.F.R. §1.131 or otherwise, to establish that the reference(s) are

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By: *Lisa Lyle*
Name: Lisa Lyle

U.S. S/N 09/992,624

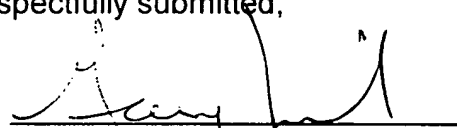
not "prior art." Moreover, Applicant does not represent that a reference has been thoroughly reviewed or that any relevance of any portion of a reference is intended.

Consideration of the items listed is respectfully requested. Pursuant to the provisions of MPEP 609, it is requested that the Examiner return a copy of the attached Form 1449, marked as being considered and initialed by the Examiner, to the undersigned with the next official communication.

Respectfully submitted,

Date: January 31, 2002

By:



Gary R. Jarosik Reg. No. 35,906
ALTHEIMER & GRAY
10 S. Wacker Drive/Suite 4000
Chicago, Illinois 60606
(312) 715-4000

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Substitute for form 1449A/PTO			Complete if Known		
INFORMATION DISCLOSURE STATEMENT BY APPLICANT			Application Number	09/992.624	
			Filing Date	11/19/2001	
<i>(use as many sheets as necessary)</i>			First Named Inventor	Fen Hiew	
			Art Unit	2123	
			Examiner Name	unassigned	
Sheet	1	of	1	Attorney Docket Number	14428.01US3

U.S. PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Document Number		Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number	Kind Code ² (if known)			
		US-6,311,323	B1	10-30-2001	Shulman et al.	
		US-5,187,788		02-16-1993	Marmelstein	
		US-				
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FOREIGN PATENT DOCUMENTS								
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		Country Code ³	Number ⁴	Kind Code ⁵ (if known)				

Examiner Signature	Date Considered
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*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.
¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.
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PTO/SB/08B (10-01)

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Substitute for form 1449B/PTO		<i>Complete if Known</i>	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>		Application Number	09/992.624
		Filing Date	11/19/2001
		First Named Inventor	Fen Hiew
		Group Art Unit	2123
		Examiner Name	unassigned
		Attorney Docket Number	14428.01US3
Sheet	2	of	2

OTHER PRIOR ART -- NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
		SAS e-intelligence, Know Your Customers, SAS Institute Inc., 2001	

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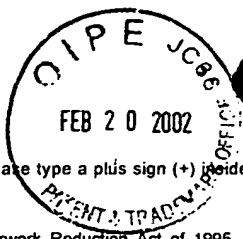
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¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

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<h1>TRANSMITTAL FORM</h1> <p>(to be used for all correspondence after initial filing)</p>	Application Number	09/992,624
	Filing Date	11/19/2001
	First Named Inventor	Fen Hiew
	Group Art Unit	unassigned
	Examiner Name	2123
	Attorney Docket Number	14428.01US3
Total Number of Pages in This Submission	5	

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ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	- Form 1449
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	- copies of cited references
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	- return postcard
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Customer No. 25541 By: Gary R. Jarosik
Signature	
Date	January 31, 2002

CERTIFICATE OF MAILING	
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Typed or printed name	Lisa Lyle
Signature	Date <input type="text" value="01/31/2002"/>

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